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APPLICANTS

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**** CONTINUING DATA ******* *ind*

This appln claims benefit of 60/444,196 02/03/2003

**** FOREIGN APPLICATIONS ******* *ind*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

**** 02/02/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> <i>Initials</i>	STATE OR COUNTRY NJ	SHEETS DRAWING 10	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 6
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TITLE

Poll scheduling for emergency calls

FILING FEE RECEIVED 1158	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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